

JULY

1963 — THIRD YEAR — No. 28

# International Review of the Red Cross



CENTENARY YEAR  
OF THE RED CROSS 1963

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# INTERNATIONAL REVIEW OF THE RED CROSS

THIRD YEAR — No. 28

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## CONTENTS

	Page
G. Owens, D.S.C. : The Red Cross. Its relationship in time and age . . . . .	337
M. Candille : The nurse and humanization of the hospital . . .	342

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## INTERNATIONAL COMMITTEE OF THE RED CROSS

<i>Eleventh distribution of income from the Augusta Fund (442nd Circular to the Central Committees) . . . . .</i>	353
<i>A mission in Algeria . . . . .</i>	355
<i>News items . . . . .</i>	357
<i>Congratulations and good wishes received by the International Committee . . . . .</i>	362
<i>Geneva Conventions . . . . .</i>	364
<i>Distinction . . . . .</i>	365
<i>Expression of condolences on the death of Pope John XXIII . .</i>	367

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## NEWS OF NATIONAL SOCIETIES

<i>France . . . . .</i>	368
<i>Japan . . . . .</i>	371
<i>Switzerland . . . . .</i>	372

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## CHRONICLE

<i>Humanitarian aid to victims of internal conflicts . . . . .</i>	377
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## A GLANCE THROUGH THE REVIEWS

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## FRENCH EDITION OF THE REVIEW

The French edition of this Review is issued every month under the title of *Revue internationale de la Croix-Rouge*. It is, in principle, identical with the English edition and may be obtained under the same conditions.

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## SUPPLEMENTS TO THE REVIEW

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### SPANISH

B. Gagnebin: Henry Dunant.— Cien años al servicio de la humanidad.— Bibliografía

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B. Gagnebin : Henry Dunant. — Hundert Jahre im Dienste der Menschlichkeit.

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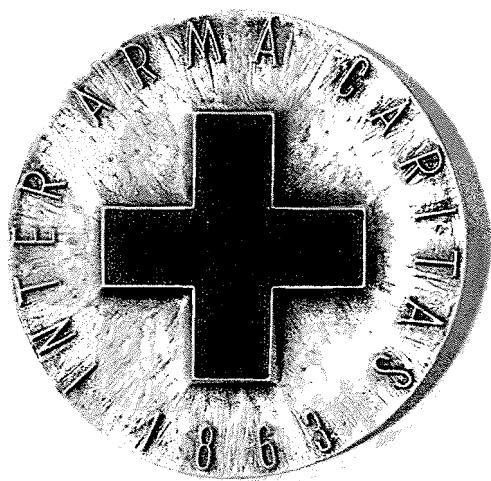
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**"CENT ANS AU SERVICE DE L'HUMANITÉ"**

**Poster of the Centenary of the Red Cross**

This work, by the Swiss painter Hans Erni, has been offered to the Red Cross.



**Commemorative Medal**

designed by the Commission for the Red Cross Centenary in Switzerland

## **The Red Cross**

### **Its Relationship in Time and Age**

The first, and still the chief, object of the Red Cross is to mitigate the suffering caused by war.

Man, from earliest time, has sought to prevent war if possible, and to mitigate its consequences when it does occur. By the "Truce of God" first recorded in 1027, fighting, then recognised as the occupation of a gentleman, was forbidden under ecclesiastical sanctions, from Thursday morning to Sunday night. This is an approach to the outlawing of war. Still older, dating from the Council of Charroux in 980, was the "Peace of God" which declared inviolable during war, the persons of peasants, merchants, and pilgrims and especially of priests, monks and nuns—on whose care the wounded and sick depended at that time. Here in the creation of a specially protected class in the midst of war, is the essential principle of the Red Cross Conventions. Both the "Truce" and the "Peace" owed their effectiveness to the existence of an outside body—the Church—to which both combatants owed allegiance.

The humane treatment of those stricken by war, whether friendly or hostile, is cardinal to the great mediaeval ideals of the warrior and the Christian, which are called chivalry.

By the middle of the 16th century, the breakdown of mediaeval order had left the world without any international authority sufficiently widely recognised to be capable of imposing limits in the conduct of war. Any mitigation of the rigours of war, for the purpose of rendering aid to the wounded, could only be brought about by specific agreement between belligerents before the campaign started, or between individual commanders. Beginning with a convention concluded during the siege of Tournai in 1581, some 300 of these agreements have been traced, some of them, within their limits of time and place, conferring greater privileges upon the service of the wounded and sick than international law confers upon the Red Cross even today.

An outstanding instance is the Treaty of Frankfurt in 1742 between the parties of the War of the Austrian Succession. This remarkable document provides that neither the sick, surgeons, chaplains or guards left with them in hospitals should be made prisoners of war, while wounded who might be captured should be returned on parole not to serve again.

At the same time the surgeons, the nurses, the healers, had sought some symbol of protection under which they could carry on their work free from armed or other intervention. In earlier times, the monks and nuns had nursed under the protection of the church with the cross as their symbol. That great and noble Order of the Knights of the Hospital of St. John of Jerusalem also chose a cross, the pointed one we all know so well today. By coincidence or design others chose the symbol of the cross, and it is recorded during the reign of Henry the Eighth that in the Channel Isles where there was an outbreak of plague, the houses where victims lay were marked upon the wall or door with a silver cross, and all who nursed the sick bore a Red Cross on their right shoulder.

So the way was paved in 1859 in the evolution of civilisation for the advent of that noble man, the Swiss citizen, Henry Dunant, who inspired the international institution we know as the Red Cross.

You are all familiar with the story of the Battle of Solferino, how Dunant surveying the scene of carnage and suffering, was so



moved he wrought with might and main to bring succour to the wounded and dying: how his leadership inspired others to help; and although he could have returned to his homeland knowing he had discharged a great humanitarian duty, he was so moved by what he had seen he devoted his life and fortune to making others aware of the appalling truths and seeking international aid and agreements.

International delegates met in 1863 as a result of Dunant's efforts and agreed to meet in 1864 with power to conclude a binding convention. Before they met, however, the emblem adopted as a symbol, viz: The Red Cross on the white ground—made its first appearance on a battlefield during the short war levied against Denmark by Austria and Prussia. This emblem although it had no standing in international law was respected by both combatants. It should be pointed out, however, that today the emblem, which is universal, has no religious significance and has also been adopted by countries not professing the Christian faith.

From this small beginning has grown the great humanitarian society we know as the Red Cross. Today it is recognised everywhere on the face of the globe and has 90 national Societies, with a total of more than 150 million members, all devoted to the service of mankind.

The Treaty of Paris in November, 1815, laid down that it was in the interest of all nations that the Swiss Confederation should enjoy the privilege of perpetual neutrality. This privilege has always been respected, and the International Committee of the Red Cross, aloof from the feuds of Europe and elsewhere, carries on its great formative work.

Today we have 4 great conventions each the result of experience gained from world or other conflict, and based on the mitigation and relief of suffering. These Conventions adopted on the 12th August 1949, follow closely the principles of chivalry, and in addition have adapted the great ideals to modern concepts.

I do not intend to discuss fully here these Conventions, as each in itself is a great document of international humanitarian Law and agreement. But any study of these conventions reveals the

great thought and experience that have gone into the making of them, and particularly the 4th Convention—relative to the Protection of Civilian Persons in Time of War—for this is the result of the depth of feeling stirred in all mankind by the treatment of common peoples during the Abyssinian War, the Spanish Civil War and the 1939-45 World War. This document covers the experiences of such tragedies.

You may think I have dwelt too long on the application of man's ideals and interpretation of those ideals in times of war but may I remind you that War, man's own creation, usually is of longer duration than natural phenomena, and consequently creates more hardship and suffering.

However, relief of suffering of any kind, no matter how it were caused has been a principle of Red Cross since its inception, for it was seen that an organization set up for relief in War could be equally effective in dealing with disasters caused by Nature.

In the 4th Convention we see an effort made to protect the citizen not only from the consequences but from the event itself by laying down classes of persons who may be protected.

Mr. Max Huber, late President of the International Committee of the Red Cross wrote :

" When civilisation thus collapses, the non-violent work of the Red Cross stands forth in the sharpest antithesis to war. While governments subordinating human rights wholly to their own designs, pursue their struggle for mutual annihilation, the suffering human being, whether friend or enemy, becomes the object of self-sacrificing service. Whether it be men's passions, hatreds or necessity that have battered down the ramparts which protect the peace between nations or within them, all is not yet lost so long as the Red Cross still lives. So long as it still carries on its arduous labour of love, a remnant of mutual comprehension survives, and may be the point of departure for spiritual reconstruction when the war is over . . . " <sup>1</sup>

How true these words are today with only the Red Cross providing for man some form of spiritual and moral sanctuary . . .

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<sup>1</sup> Max Huber, *The Red Cross, Principles and Problems*, Geneva, 1941.

Creation of Henry Dunant's idealistic thought, it meets the prerequisite of our time and age, and millions of Red Cross members in almost all the countries of the World must provide a field of force of great significance for man's future.

Thus it might be seen from this brief survey that the Red Cross as we know it, is the logical result of man's inner desire to find some medium whereby the consequences of man's appalling actions in war may be rendered less severe, and to render aid to those suffering distress at all times, no matter what the cause.

Were we in a position to predict the future, we might find that the Red Cross could well be the medium for man's continuance and survival.

**G. OWENS, D.S.C.**

Assistant General Secretary,  
Western Australian Division,  
Australian Red Cross.

## The nurse and the humanization of the hospital

*On several occasions the International Review has published articles and information on a problem which at the moment is holding the attention of people and institutions concerned in every country, that of the humanization of the hospital.*

*A considerable development is to be noted in this field and pilot-hospitals are showing the way forward with numerous innovations. These problems correspond to those of many National Red Cross, Red Crescent and Red Lion and Sun Societies, which possess their own hospitals and train nurses in their own schools.*

*During a talk given to the last congress of the National Association of Belgian nurses, Mr. Marcel Candille spoke about this problem recalling what must be understood by "humanization of the hospital", and the part which the nurse can play in the large-scale and necessary progress which this term implies. The wide-spread knowledge which Mr. Candille's work, as editor of the Review L'Hôpital et l'Aide sociale à Paris, which is publishing the text of this talk (1962, No. 16), gives him in this field, has led us to reproduce an article which will be of outstanding interest to our readers. Our thanks are due to the author. (Editor's Note.)*

### I

Humanization of the hospital: the expression has something unsatisfactory about it. Surely, the hospital, by nature and vocation,

is fundamentally and essentially a humane institution ? The expression is not, therefore, fully acceptable to the mind unless it signifies that the hospital which is already an intrinsically humane enterprise, will never be humane enough, given that its subject is man at grips with the pain of living and the anguish of death. Since the hospital is already humane *in itself*, we must make it still *more humane*. Particularly, must it be the place where the quality of companionship, irreplaceable everywhere, but here more than anywhere, exists if possible unsurpassed.

If the expression and what it means, have only recently appeared, it is *because the obligation to humanize the hospital is recent in itself*. It is only at this late stage of our civilization that this serious problem has been raised. Why ? Because like many other institutions, the hospital of today is very different from the hospital of the past.

Over a long period, the hospitals faithful to their primary vocation, remained asylums opened by charity to misery rather than to illness. One can quote the beginning of the 19th century as the period in which they became true *nursing houses*. But since the First World War and above all since the Second World War, increasingly rapid evolutionary tendencies have made them into health-creating *laboratories*, reserved for the most serious cases—no longer nursing establishments, nor even laboratories, but *factories*. The late Professor Delore, of Lyons, was able to imagine, without straining the bounds of credibility, to use his own words, a surgeon who, having rationalized all the mechanisms of his profession, finds a subject already asleep on the operating table whom he has never seen and whose face he does not know. He then operates on an arm or opens a stomach, never for a moment thinking of the patient as a man, by which I mean a human being.

A medical conversation took place recently on the theme of “therapeutic eagerness” and “the eagerness of investigation” was mentioned.

This example of the surgeon, these expressions which we have just quoted, show, if there was any need, that the hospital is amongst the most privileged of places where a thousand considerations arise over the relations of science and human beings

in the modern world. To possess a technique, yes. To be possessed by it, no.

Taking this view, the humanization required of the hospital can be defined as *the requirements of a sick man faced with conditions which are henceforth imposed upon him, or which risk being imposed upon him during his suffering, his illness or at his death.*

This is the claim of the sick man. Because the hospital was not made for the primary purpose of giving highly evolved medicine the opportunity to function and to develop—nor of enabling the nursing staff to practise its profession. The hospital is primarily and immediately for the patient and the patient alone. Doctors and nurses are the means, the patient is the aim. The humanization of the hospital must therefore act in favour of the patient and the patient alone. Because he alone has caught a disease, because he is wasting away, because he is suffering and, possibly, risks dying, the patient is for this very reason the only direct beneficiary of the humanization of the hospital.

What does it consist of ?

The humanization of the hospital is the result of two factors of a very different nature and of differing importance: one material, the other spiritual, or rather psychological.

The will to humanize the hospital *on the material level* involves the entire hospital, its architecture and its fittings just as much as its structures and its methods of operation. Each problem, at the idea stage as at the organization stage, will have a different solution according to whether the willingness and desire are present or not present to fashion directly all the equipment and activities of the hospital for the greatest physical and psychological good of the patient. From this point of view, the perfectly humane hospital will be the one where all the material commodities facilitate the specific activity of each of the members of the hospital team, the director, the doctors, nurses, service staff, etc., for the greatest good of the patient.

But the humanized hospital should certainly not be the exclusive counterpart of abundant credits placed at the disposal of an ingenuity to create the most functional architecture and to incorporate in it the latest equipment.

This would be too easy. The nations best endowed materially are not necessarily those in which the hospital is the most perfectly humanized. Because the humanization of the hospital implies, besides the material factor which certainly is not negligible, *a factor which is still more important and of a spiritual character*. From this point of view, the most perfectly humanized hospital will be the one in which one best succeeds in reconciling the practice of the most highly evolved medicine with the maximum of human understanding. The humanization of the hospital is above all the humanization of the practice of hospital medicine.

What the patient demands, is not by priority more comfort or more luxurious equipment. Rather is it, with regard to the immense current possibilities of medical and surgical techniques, the right not to be treated as a mere clinical case—it is a medicine which applies to him as a complete man. What he does not want, is to be considered as an entity, an abstraction, as a mere object of scientific curiosity. What he has the right to ask, is to be considered as a person, a living reality who knows himself to be unique and irreplaceable. In fact, he asks that during his illness, those who look after him, those in whose care he has placed himself and whom, for the most part, he has not chosen, are interested in and deal with his entire being, and that the illness is not arbitrarily and artificially separated from the person who is suffering from it.

Thus the humanized hospital is the synthesis of two factors : on the one hand, the financial means in the service of a certain ingenuity—on the other hand, a certain state of mind, a certain conception of its rôle and its mission, the latter, directed entirely towards the man in suffering who has to be nursed and returned to health, and, if there is no hope for him, who has to be accompanied on the long journey into the hereafter.

As to the hierarchy of these two factors, the humanization of the hospital is firstly a problem of ethics and psychology and only secondly a problem of arrangements and organization. Because inert, cold technique by itself is no help to man in general, and even less so to man whose health and existence are in jeopardy, and one can perfectly well suffer without help and die desperate in a world over equipped and glittering with chromium and calculations.

In our conception, the hospital is the place, par excellence, where

although man has a duty to enlist techniques in his aid, he cannot and must not do so except in an upsurge of charity.

## II

To say that the humanization of the hospital is primarily a problem of medical ethics and that therefore in this perspective, the humanization of the hospital is above all the humanization of medicine, is to devote the part of primary importance which is played in the enterprise to the doctor and to the team which surrounds him.

The nurse is an essential element in the composition of this team. However subordinate to the doctor it may be, her rôle nevertheless is of capital importance. Taken as a body, nurses form the largest group of any branch of personnel in the service of the patient. The nurse is in *permanent* contact, day and night, with the patient, and in *immediate* contact with him. As soon as the diagnosis has been made, she is the doctor's indispensable intermediary in the application of the treatment.

The task of conferring on the hospital an increasingly humane quality therefore rests, in large part, on the activity of the nurse and on the spirit and manner in which she understands it and carries it out.

In the first place, her professional competence is a humanizing factor. It is the first condition of her efficiency. Examinations, analyses, care and treatment become fuller, more complicated and more difficult every day. Goodwill alone and a spirit of charity are no longer enough. Technical qualification is necessary and not only to the patient, but also to the young nurses, trainees and recruits who could only receive valuable instruction and initiation from an experienced person. Furthermore, in the constantly changing world of modern therapeutics, the nurse must not content herself with established ideas, but must fight against routine and atrophy and perfect her knowledge by refresher courses and edifying lectures, that is to say bring her knowledge up-to-date by raising it to the level of the possibilities which fresh discoveries place within our reach every day. The humanization of the hospital in



large part goes hand-in-hand with the intellectual and professional value of the nurse.

Moreover, individualism has less and less place in the hospital. The nurse is a constituent cell of a working community, and over and above her own competence and qualifications, she must be imbued with the team spirit. This could not result from chance acquaintance, which has only a periodic juxtaposition of people confining themselves to working on long parallel lines and independently of one another, with a view-point limited to their respective tasks. The team requires a community conscience of each of its members. To be integrated in a team presupposes a true perception of the functional and spiritual links, non conventional and formalist, of which it is made up. Every nurse must therefore be animated by a sense of solidarity and responsibility before the common aim. The behaviour and attitude of each one of them gives the team that homogeneity and harmony, necessary to carry out a concerted action of high quality.

But there is more still, and here we reach the heart of the problem. By its nature, the nurse's day revolves round the patient. The hospitalized patient is a separate being (family, profession, habits) and more or less out of his mind with all sorts of anxieties. Even more so, if there is no hope for him. Faced with such a situation, the nurse must continually persuade and convince herself, that she is not only practising a profession which enables her to earn her living, but that in accepting her duties she has answered the call of a vocation. And this is so true that until quite recent times, nursing was practised almost exclusively by members of specialized religious orders, such as the brothers of Charity and the sisters of Charity of Saint Vincent de Paul. Logically, one only entered, one only enters, such an order to follow a two-fold vocation, one religious and the other nursing. This last point is so true that in most cases, the three habitual vows in any religious order, are supplemented by a fourth, the vow to devote oneself and pledge oneself to the solace of the sick.

The problem has not changed in nature or in form from the fact that, now-a-days, the nursing profession is practised by numbers of lay people. There is a form of implicit contract between the nurse and the patient, the contract to give of one's best to the

inhuman and incomprehensible world of suffering and death in hospital. To devote oneself wittingly and in all lucidity to this saving mission presupposes a depth of character and the possession of those outstanding qualities which are not the most fairly shared things in the world, selflessness and the thoughtfulness and politeness which come from the heart.

To accept the patient as he is, and God knows physical decay can sometimes take on trying forms. To look at him other than with a professional or administrative eye. To know him by his name and not to call him by his number. To question him, to take the time to question him. To stop by his bed for a few moments. To ask his news and to speak to him about his own affairs. To speak to him, but not in an off-hand manner, without excessive familiarity, which would be particularly out of place where old people are concerned. Not to give him the impression that one is in a hurry. To know him and to smile at him. To respect his modesty. To preserve his sleep, his rest, that is to say to fight against noise, which is to say frequently against oneself. Not to be abrupt with him. Not to consider him as a mere case, an object (a beautiful sputum, a magnificent cancer). Not to humiliate his dignity as a human being. Not to employ terms which would add to his confusion (cancer, syphilis, senility, taint). To tackle any job from the highest to the lowest, and the most prosaic, with equal care for work well done. To fight day after day against becoming accustomed to the physical and moral suffering of others.

All these are so many examples which could be multiplied ad infinitum, so sociologically diversified is hospital life. They require only goodwill and warm heartedness. The nurse who wishes to contribute towards making the hospital more humane, does not consider these acts as an *hors d'œuvre*, a charitable supplement, a bonus. They form part of the professional duty included in its integrality and they constitute by themselves a form of psychotherapy which is undoubtedly effective. In hospital, the nurse is at the service of the feeble and she owes him over and above her services and her devotion, the offering and the gift of her kindness, kindness which can be described as the only language enabling contact to be established between the world of the patient and that of the hale and hearty.

The death of the patient is a circumstance particular to, and unfortunately common to, the hospital. The hospital, despite all progress and because it is what it is, works in close co-operation with the cemetery. A well-known professor of a medical clinic, said fairly recently in his inaugural lesson "death in hospital is atrocious".

I imagine that these words were aimed more at the material circumstances which, unfortunately, still too often accompany the end of a life, in particular the sight which is so depressing and hard for the neighbouring patients, and which arises from beds still too frequently being close together, noises, conversations, comings and goings. At the hospital less than elsewhere, one does not die alone.

What does the death of a patient mean to the nursing staff? One cannot be engaged in a nursing relationship, whatever it may be, with a human being in the process of dying without being totally involved oneself in his feelings and his anguish at death.

In the first place, for the nursing staff, the death of a patient represents a failure for professional activity, that is to say for one's self-assurance. When a patient dies despite the nursing he has been given, it is I who am placed in question, it is my efficiency which is contested.

But, over and above this purely personal emotional reaction, what matters is the objective situation of the dying person who has to cross the most serious threshold of his existence. We must learn to accord the maximum respect to the death of others. Respect which is felt and therefore quite the contrary of habit influencing sensibility and of automatism influencing gesture. The respect which is lived and which is active: the presence of a nurse who retains her calm and self-control at the same time as her ability to sympathize, is of inestimable value to the person tortured by the suffering of living. Who can measure the weight of a look which understands but which smiles nevertheless, the price of an affectionate pressure of the hand at the decisive moment when someone is in the last stages?

Here in particular, the nurse, scarcely less than the doctor, plays the primary rôle. From a general point of view, her job is to supply what the hospital, in its material aspect, can only incompletely and imperfectly achieve. It is her job to complete and perfect,

it is she who must infuse a spirit into that which, without her, will remain dull and cold. As medicine becomes more and more scientific and as it uses increasingly complicated apparatus, it is for her to personalize it in its application. Her indispensable technical competence can only have human value if it is illumined with faith renewed daily in each and everyone of its manifestations.

### III

We have put forward an exacting conception of a profession which is difficult and arduous, both physically and mentally, of a profession which is stirring and also sometimes disheartening. But, if one can and must ask a great deal of the nurse on every level, one must—and this is only logical and just—do everything to facilitate her task. This will be that much more completely fulfilled when it is done more comfortably.

It is for those in charge in the hospital, it is the doctors' duty, to give the nurse their co-operation without which her rôle would risk not having all the effectiveness and all the humanity possible and desirable.

How in fact, can the nurse effectively carry out her rôle such as we understand it if, by force of outside circumstances which do not depend on her, she can only devote herself to it in a spirit of permanent and legitimate dissatisfaction ?

In the first place, over-working of nurses must be avoided. This is a question of staffing and it is common knowledge that recruitment suffers from a general shortage. Therefore, since all patients must be treated in some way or other, the nursing is spread out and is done hurriedly. However, a rhythm of work which is too intense is a factor in errors or omissions which can have dramatic consequences.

The nurse is sometimes in a position at meal time, either of having to leave the ward without being replaced, or of having to make do with a sandwich which she eats while working. In the evening, dead tired, she may well ask herself if she can carry on the next morning.

Rest periods, hours of work and annual holidays must be judiciously improved. It must be possible to reconcile personal life

and family life with carrying out a profession. If they were compromised, this could only lead to repercussions in the way the work was done.

For nurses who live in, a small room in an isolated corner of the hospital is no longer enough. Like the staff doctors, they must have their own quarters with rooms which are suitable, comfortable and modern, a hall, library, dining-room, garden, sports . . . in one word, all the commodities and facilities necessary to recuperate and relax.

Finally, remuneration must be in proportion to the training acquired and the work given, just as the consideration surrounding the nurse must go hand-in-hand with the technical and social obligations which she is being asked to assume.

Over-work, incompatibility of family and professional obligations, insufficient remuneration, are some of the points raised in a number of nurses' letters in reply to an enquiry instituted by the *Concours Médical* and they speak volumes for a certain state of mind, certain abandonments and certain vocations which have come to nothing.

The members of public assistance commissions, the hospital chiefs should never forget that the nurse's working and living conditions have a definite influence on the spirit in which the service is given. Consequently, the desire to humanize the hospital entails, by its very nature, the genuine anxiety to humanize the conditions in which the nursing profession is practised. In order of importance, the first problem is to obtain the necessary personnel; as long as this is not settled, the other undertakings will be useless and doomed to failure from the start.

Secondly, there can be no humanization of the hospital without humanization of the staff's living conditions.

It is only when these conditions are fulfilled that the nurse will be in a position to play the major rôle devolving on her in a direct humanization of the hospital, right by the patient, in the spirit and on the lines which we have set out.

As for the doctor, much could be said about his work in relation to the nurse. Let us merely give some concrete details.

He must promote the continued development of the nursing staff's knowledge and not content himself, for example, in the case

of a new medicament, with giving some details on the posology, but satisfy the nurse's desire and need to be better informed, because in this way she will be more fitted for her responsibilities.

What matters above all is that the doctor should be a real head of team. Everyone in his own place and at his own level must play the part assigned him.

Under these conditions, the doctor will merit the nurses' support and that attentive help which will enable him to admit to the patient the necessity for treatment and to obtain his participation.

Certain nurses assigned to particularly arduous and difficult posts, could not carry on their job if they did not feel they were supported by a head of the team who was fully aware of the mental tension to which they were sometimes subjected.

To sum up.

In the task of humanizing the hospital, the nurse has a positive rôle to play which depends entirely on her: proper technical training and a permanent desire to improve her professional competence—a sense of team spirit which over and above the increased therapeutic possibilities will bring out the permanent requirement of human service—an evolved moral conscience which reads the patient's psychology and gains his confidence.

But to play this rôle which is expected of the nurse, she must be able to count on the concern of the hospital authorities to provide the best possible conditions for technical and human work of optimum quality, and she must be able to count on the doctor promoting an effective association with the whole life of the team.

At this price, the hospital, side by side with the health values which it has to defend and promote, will safeguard the intrinsic dignity of the patient and the inestimable valour of man's suffering and anguish.

**MARCEL CANDILLE**

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# INTERNATIONAL COMMITTEE OF THE RED CROSS

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## **Eleventh Distribution of Income from the Augusta Fund**

GENEVA, JUNE 25, 1963.

*Circular No. 442*

*To the Central Committees of the National Red Cross  
(Red Crescent, Red Lion and Sun) Societies*

LADIES AND GENTLEMEN,

The Regulations of the Augusta Fund provide for the distribution of income from the Fund every fourth year on the occasion of the International Red Cross Conferences. As these Conferences do not take place at regular intervals, the International Committee of the Red Cross has informed the National Societies, in its Circular No. 429 of March 20, 1960, that such income would henceforth be distributed every fourth year, irrespective of the date on which the Conferences are held.

The last distribution took place in 1960 and the International Committee will proceed to the next one, the eleventh, in the course of the spring of 1964.

In conformity with article 7 of the Regulations, applications for grants should, in order to be taken into consideration, reach

#### INTERNATIONAL COMMITTEE

the Committee by *November 1, 1963 at the latest*. It will be recalled that the income from this Fund shall be devoted :

- a) either to missions which the Central Committees judge expedient to organise in the general interest of the Red Cross work ;
- b) or to women's associations, and especially those concerned with setting up nursing schools ;
- c) or to any other object of practical utility.

The International Committee would be grateful if National Societies wishing to apply for a grant would indicate all appropriate details on the use to which they intend to devote the grant. It is only in this manner that the Committee will be able to come to a decision with a full knowledge of all the facts.

FOR THE INTERNATIONAL COMMITTEE  
OF THE RED CROSS

**Léopold Boissier**, *President*



## A MISSION IN ALGERIA

As is mentioned elsewhere in the *International Review*, the ICRC charged Mr. S. Gonard to examine the activities of its delegation in Algeria and to have an interview on that subject with the President of the Algerian Government, as had been agreed in February of this year.

In June 1963, Mr. Gonard, after having conferred with the head of the delegation, went to the places where the delegates of the ICRC have been carrying out their activities for the past three months, for the most part by teams of two delegates each. He was able to assure himself that, as regards visits to former harkis in detention and also concerning searches for persons missing since the "cease fire" of March 19, 1962, the delegation's activities are proceeding in a normal manner.

All harkis detained in civilian prisons have been visited by the delegates who have been able to speak with each one without witnesses. Out of 2,500 harkis visited, about 1,300 have expressed the desire to be transferred to France. Nominal rolls have been drawn up for the governments concerned. This return having been made, the ICRC hopes that a first batch of 300 harkis will shortly be able to be released, in accordance with statements recently made in Paris by Mr. Bentoumi, Keeper of the Seals, and Mr. de Broglie, Secretary of State. It hopes that some hundred detainees under 20 and over 60 years of age who also wish to go to France may be added to this first group.

In the event of the Algerian Government deciding to release this category of harkis, the ICRC, in accordance with its humanitarian rôle, has offered the services of its delegates, who could be entrusted with ensuring that such a transfer would be carried out under satisfactory conditions.

As regards places of detention, the ICRC, according to its custom, has regularly kept the appropriate Algerian authorities

informed of the observations made by its delegates as a result of their visits. The latter's mission has moreover been facilitated thanks to the excellent contacts and the good relations which they have been able to have with Algerian Civil Justice officials.

As regards missing persons, lengthy and patient negotiations are being very actively pursued. The search for witnesses, relations and for those living in the same building in which the missing person resided is difficult as, since the events of 1962, the movement of the urban populations has been fairly intense, with the result that many traces have been lost. It will not be possible to give information on this subject until the whole of the tracing action has been completed.

The Vice-President of the ICRC has been able to observe the delegates' devotion and diligence, as well as the excellent relations which they maintain with the Algerian authorities, the representatives of France and with the population with whom they are in daily touch both in the towns and in the douars.

The French and Algerian Governments are kept regularly informed of the activities of the ICRC delegation in Algeria and of the progress of its work. To this end, the audience which President Ben Bella accorded to the Vice-President of the ICRC was most useful in determining the way in which the humanitarian work which has been undertaken may be satisfactorily accomplished.

Mr. Gonard has also informed Mr. Gorse, the French Ambassador, of the observations which he had made during his stay in Algeria with the ICRC delegation.

## **SUNDRY ACTIVITIES**

### **News Items**

#### **In the Yemen**

The International Committee is pursuing its activity in favour of the victims of events in the Yemen. Despite the great difficulties caused by the very nature of the country and the conditions in which this struggle is going on, the Red Cross is anxious to remain on the spot in both camps. Its two doctor-delegates have arrived back in Geneva for consultation : Dr Jürg Baer came from Sanaa, capital of the Yemen Arab Republic and Dr Bruno Beretta from the southern regions of Saudi Arabia. The ICRC is examining with them the possibility of arranging further releases or exchanges of prisoners.

It should be mentioned in this respect that just before leaving Sanaa, Dr Baer visited sixty-five members of the Royal family interned in the capital. Furthermore, he also organized important distributions of medical supplies offered by National Societies of the Red Cross and the Red Crescent.

Dr Beretta has pushed on with his arrangements for receiving the medical teams which are awaited in the Royalist camp. He also occupied himself with the fate of several prisoners of war who were captured by the Imam's troops and who are at present undergoing treatment in Saudi Arabian hospitals.

#### **Thanks to the ICRC**

Mr. Bachir Boumaza, Minister of Labour and Social Affairs in the Government of Algiers, and Member of the Algerian Committee of the Red Crescent and leader of his country's Delegation to the International Labour Conference, paid a visit to the International Committee in order to express his thanks for the humanitarian

## INTERNATIONAL COMMITTEE

relief which he personally received like so many of his compatriots, during the recent conflict. His Excellency, accompanied by the Consul General, Mr. Ould Hocina Cherif, had a discussion with Mr. S. Gonard, Member of the ICRC, Mr. Roger Gallopin, Executive Director, and Mr. Pierre Gaillard, Delegate. He recognized the latter as the person who on several occasions brought him relief and comfort from the Red Cross when he was in detention. His discussions at the ICRC Headquarters bore also on the organization of the Algerian Red Crescent which is at present being formed.

### **In the Congo**

In April and May 1963, representatives of the International Committee made several visits to detention camps in the Congo. They were in particular preoccupied with the fate of political and military prisoners. The members of the ICRC Delegation at Leopoldville first of all visited, on April 12, the Makala and the Ndolo prisons. They intervened with the authorities in order to have improvements made in the conditions of detention, particularly as regards food, and they were moreover able to obtain freedom for a few military internees. Later, Mr. G. Senn, delegate, visited the Central Prison in Luluabourg, where there were 200 prisoners. He took the opportunity also to visit the hospitals in this town and to enquire about general conditions in the region, and the needs of the population which has been sorely tried by events.

During his stay in Luluabourg, the delegate gave a lecture on the Geneva Conventions to the officers of the Congo National Army stationed in that town.

Following up his previous visit to the prison of Kong-Kong, some 5 km from Stanleyville, Mr. Senn continued his endeavours for the release of 102 members of the Katanga Constabulary who were imprisoned there and who were finally freed on May 14.

### **In Sub-Equatorial Africa**

From May 1 to 16, Mr. G. Hoffmann, General Delegate of the ICRC in Sub-Equatorial Africa, undertook a mission to Kenya, Tanganyika and Uganda. In the course of his visits he made useful contacts with the authorities and the local organizations of the Red Cross.

### **In Djakarta and Singapore**

The Delegate-General of the ICRC in Asia, Mr. André Durand, coming from Tokyo, stopped in Djakarta where he contacted the Indonesian Red Cross. The latter, in close co-operation with the ICRC, has effected the payment of pensions and allowances which the Netherlands Government grants to its nationals resident in Indonesia.

In Singapore, Mr. Durand was received on May 10 by the Prime Minister, Mr. Lee Kuan Yew. Following this meeting, he was permitted to visit the political detainees in the Singapore prisons. Shortly afterwards the Delegate-General returned to Geneva.

### **Repatriation of Koreans from Japan**

The 106th transport of Koreans desirous of leaving Japan for a place of their own choice in their country of origin left the port of Nyigata on May 10, 1963. Aboard were 290 persons who disembarked at the North Korean port of Chong-Jin.

Since 1959 the total number of persons repatriated under the auspices of the Japanese Red Cross and the control of the ICRC is 79,281.

### **Mission in Latin America**

The International Committee delegated Mr. Pierre Jequier for a short mission in several countries of Latin America. Mr. Jequier having been invited to take part in a regional conference in Buenos Aires, organized by the Argentine Red Cross, and to contact the Red Cross in Venezuela, the ICRC desired to complete its delegate's mission by visits to several other National Societies of the Red Cross with which it had not had the opportunity to make direct contact for a number of years. After his stay in the Argentine, Mr. Jequier will terminate his mission with a visit to Bolivia, Peru and Venezuela.

### **In Greece**

Mr. Germain Colladon, delegate of the ICRC, has left for Athens, where he will contact the authorities and the Hellenic Red Cross.

## INTERNATIONAL COMMITTEE

He has been entrusted with a further series of visits to prisons where he will bring relief of various kinds to the detainees.

### **Geneva University honours Mr. L. Boissier**

On a proposal put forward by three Faculties — Arts, Economic and Social Science, and Law — Geneva University has conferred on Mr. Léopold Boissier, President of the International Committee of the Red Cross, the title of Doctor of Political Science *honoris causa*. This distinction was bestowed on him on the solemn occasion of the “Dies Academicus” of June 6, 1963. In the report published by Geneva University to mark this occasion, may be read the following comment :

“ The University of Geneva is alive to the immensely important part played by the International Red Cross, this institution created a hundred years ago by five citizens of Geneva guided by the light of Henry Dunant’s ideal. In time of war, it is thanks to the Red Cross that men in all countries can maintain hope in the future of humanity. Not only does it protect the wounded on the battlefields, the prisoners in the camps, the civilians in the open cities, but, often, it is the only interconnection between belligerents. For all these reasons, and wishing to manifest its gratitude towards this humane and pacific work which is illustrative of our country and gives yet further justification to our policy of neutrality, Geneva University considered that it could hardly do better than to honour the President of the ICRC, Professor Léopold Boissier.”

### **The sequel to a competition**

The poster published in 1962 by the ICRC was a great success at the annual competition organized by the Federal Department of the Interior in Berne. The jury of the competition indeed gave a place to this poster amongst the best for the year 1962.

The poster, depicting a patient supported by a nurse’s arm was intended to publicize the ICRC’s annual collection for 1962. It is the work of Mr. André Masmejan and Mr. Walter Schmid, of Geneva.

It should be mentioned that in 1962 the people of Switzerland gave to the ICRC the sum of Swiss frs. 1,219,618.29 which represents an increase of Swiss frs. 83,026.29 over the figure for 1961.

### **Mission in Algeria**

Mr. S. Gonard, Vice-President of the International Committee, went to Algiers to examine the activity carried out by the special mission of the ICRC. It will be recalled that this activity consists on the one hand of undertaking the necessary investigations into the fate of persons missing in Algeria since the cease-fire of March 19, 1962, and on the other hand of visiting detainees arrested for acts committed in connection with the recent conflict.

During his stay in Algiers, Mr. S. Gonard was received by the Head of the State, Mr. Ahmed Ben Bella, with whom he examined the results of the work achieved by the special mission up to the present time.

## CONGRATULATIONS AND GOOD WISHES RECEIVED BY THE INTERNATIONAL COMMITTEE

Messages continue to flow into the ICRC on the occasion of the Centenary of the Red Cross. Following those which were sent by the National Societies, we are publishing below some messages and addresses which have been sent by institutions of various countries:

### World Medical Association

*L'Association médicale mondiale désire présenter au Mouvement de la Croix-Rouge, par votre intermédiaire, ses congratulations pour cent années de magnifiques services à l'humanité. Elle rend hommage, ainsi, à la mémoire de son fondateur et l'initiateur de la Convention de Genève, Jean-Henry Dunant.*

*De nombreuses caractéristiques de la noble histoire de la Croix-Rouge la rapprochent des professions médicale et paramédicale. L'une est particulièrement importante de nos jours, c'est-à-dire le caractère essentiellement non-gouvernemental de la Croix-Rouge. Il a été créé par la dévotion et l'inspiration d'une seule personne et ses successeurs ont sauvegardé fermement son indépendance et son intégrité. Dans un monde qui se trouve de plus en plus influencé par les tendances gouvernementales, tant sur le plan national qu'international, l'ardeur infatigable de la Croix-Rouge reçoit l'admiration surtout d'organismes non-gouvernementaux, telle ma propre Association — l'Association médicale mondiale.*

*Sans aucun doute, l'humanité toute entière espère ardemment que la Croix-Rouge continuera à la servir avec autant de dévouement dans le futur que par le passé. Personne ne souhaite ceci plus intensément que les médecins du monde représentés par leur association mondiale.*

### International Medical Law Society

*La Société de Droit International Médical, en sa séance du 20 mai, a exprimé le désir de s'associer très cordialement au Centième Anniversaire de la fondation du Comité International de la Croix-Rouge et a formulé le vœu suivant :*



*« Admiratrice de l'œuvre magnifique et féconde que le Comité International de la Croix-Rouge a accomplie depuis un siècle, la Société de Droit International Médical lui adresse ses plus vives félicitations, à l'occasion du Congrès et des Fêtes du Centenaire, et ses vœux très sincères pour la poursuite et le succès de ses activités, compatissantes et si généreuses, au service de l'humanité ».*

### **Girl Scouts of the United States of America**

*It is my great privilege to convey to you the hearty congratulations of Girl Scouts of the United States of America on the Centenary of the International Red Cross.*

*As the Scouting movement for girls has spread throughout the world, it has had the friendship and help of national Red Cross organizations in many countries.*

*In the United States we rely on the American National Red Cross for training in First Aid, Life Saving, and many other essential parts of our program. We are grateful to those who have made this possible, and salute Red Cross workers everywhere in the world who are helping young people serve their communities and countries.*

### **International Council of Benevolent Societies**

*Au moment où le Comité international de la Croix-Rouge fête son Centenaire, c'est avec un sentiment reconnaissant que nous nous associons à tous ceux qui viennent rendre hommage à l'œuvre magnifique qu'il accomplit journellement, en contribuant non seulement à maintenir un prestige qui appartient déjà à l'Histoire mais encore à le relever sans cesse.*

*Le Conseil international des Agences bénévoles tient à cette occasion à adresser ses sincères félicitations au Comité ainsi qu'à son Président, et à leur exprimer ses souhaits pour un avenir prospère.*

### **International Federation of Surgical Colleges**

*At the meeting of the Executive Committee of the International Federation on 20th April it recalled that this is the Centenary Year of the Red Cross. The Committee drew up and signed a resolution of congratulation and good wishes, and the members present appended their signatures. They asked me to forward the document to you and I have great pleasure in sending it with this letter.*

*In this the Centenary Year of the Red Cross, the International Federation of Surgical Colleges sends greetings and most cordial congratulations to the International Committee of the Red Cross and the League of Red Cross Societies.*

## INTERNATIONAL COMMITTEE

*No organization could have earned more fully the gratitude and admiration of the whole world than the Red Cross, which now for one hundred years has striven so earnestly and so successfully to relieve the sufferings of humanity. That the Red Cross can appear on any scene unmolested and unsuspected of political intrigue is a tribute to the integrity with which it has carried out its works of mercy throughout the years of its existence.*

*The International Federation of Surgical Colleges is happy and proud to collaborate with the Red Cross and assist its work in any possible manner.*

*The Executive Committee of the International Federation now assembled in Brussels sends its most heartfelt good wishes to the Red Cross for future success in all its endeavours for the welfare and happiness of mankind.*

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## GENEVA CONVENTIONS

By means of a communication which was delivered in Berne on May 18, 1963, the Royal Government of Saudi Arabia notified the Swiss Federal Council of its accession to the Geneva Conventions of August 12, 1949. This accession, which is free of any reservation, will come into effect on November 18, 1963.

Moreover, by a declaration of continuity, two other countries have confirmed their participation in the Conventions, with effect from the date on which these countries achieved independence. The countries concerned are Tanganyika and Senegal, whose declarations reached Berne on December 17, 1962, and May 31, 1963, respectively.

Thus, the total number of States bound to the Conventions by ratification, accession or declaration of continuity is now 94.

## **DISTINCTION**

The International Committee has awarded its Silver Medal to one of its delegates, Mr. Roger Vust. It was during a plenary session on June 6, 1963 that Mr. Léopold Boissier gave him this souvenir in the name of the institution over which he presides.

Mr. Vust has represented the ICRC since 1942 in Algeria where, from 1944 to 1945, as assistant to Dr. Wyss-Dunant, he visited the prisoners of war. At the same time he was constantly intervening with the Allied Military Authorities for the organization of relief convoys and the forwarding of civilian messages. From 1945 onwards, he was the head of the Delegation and up to 1947 he also attended to the repatriation of the seriously wounded and to the tracing of missing persons.

In 1955, following events in Algeria, the ICRC again had recourse to his services. Numerous persons came to his home—which was the headquarters of the ICRC representation in Algeria—invoking Red Cross intervention to trace missing persons, to obtain news of prisoners and also seeking aid and relief.

From 1958 until the end of the war in Algeria, Mr. Vust visited places of detention. He continued in office during the troubled times at the early stage of Algerian independence, intensifying his efforts, and taking an active part in all ICRC functions in Algeria including, apart from visits to places of detention and the tracing of missing persons, despatch of relief to regrouped communities, and assistance to the disabled and to all victims of the Algerian conflict in general.

In his exposition of these functions, Mr. Boissier added a few words reflecting Mr. Vust's activities and the spirit in which they were accomplished.

## INTERNATIONAL COMMITTEE

“ Mr. Vust was guided and inspired by a rare quality of which he is completely possessed, kindness ; an instinctive kindness which seemingly is not aware of itself and is thereby the more profound and the more active. He has witnessed so many acts impelled by hate, thirst for vengeance, cowardice and fear. All that did not diminish one jot his belief in his mission, or his will to do good in the face of all odds. His quiet courage and his equanimity enabled him to maintain a transcendancy over men and situations, constantly guiding him in his task so fraught with peril. Unceasingly, he strove to convince and, to convince, to understand.

Mr. Roger Vust has accomplished a great task in Algeria. By his acts and by his person, he has brought honour to his country and the International Committee of the Red Cross. Innumerable men, women and children, French and Algerian, owe their salvation to him. Therein lies his finest reward.

In the name of the International Committee, I am happy to bestow upon him this Silver Medal as a modest symbol of our gratitude and affection.”

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## EXPRESSION OF CONDOLENCES ON THE DEATH OF POPE JOHN XXIII

It was with deep regret that the International Committee of the Red Cross learned of the death of Pope John XXIII. Mr. Léopold Boissier, President of the ICRC, sent the following telegram to the Secretary of State of the Vatican :

*I am profoundly moved by the demise of His Holiness John XXIII of whom I personally shall retain a vivid memory for his beneficent attitude and benevolent support to the humanitarian tasks of the Red Cross. The International Committee of the Red Cross pays homage to the great personality of Pope John XXIII, who worked so intensively for peace. I request you to receive and to convey to the College of Cardinals the expression of my most respectful condolences.*

Cardinal Aloisi Masella, the Cardinal camerlingo, replied by telegram as follows :

*I would express the deep appreciation of the College of Cardinals for the delicate tribute to the memory of Pope John XXIII and for the participation of the International Red Cross in the deep mourning of the Holy See.*

It will be recalled that Mr. Boissier, during a visit to Rome in February 1962, was received in private audience by John XXIII. His Holiness had a thorough discussion with the President of the ICRC for almost an hour.

The International Committee was represented by its Vice-President, Mr. Martin Bodmer, at the pontifical requiem mass at the Basilica of Notre-Dame in Geneva, officiated by Monseigneur François Charrière, Bishop of Geneva, Lausanne and Fribourg.

# NEWS OF NATIONAL SOCIETIES

Formerly: International Bulletin of Red Cross Societies, founded in 1869

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## France

National Days of Commemoration of the Centenary of the French Red Cross took place in Paris on May 24, 25 and 26, 1963.

They started with an inaugural meeting at the Palais de Chaillot, presided over by General de Gaulle.<sup>1</sup> The President of the French Republic delivered the following address :

*It is man's destiny that his life should be a struggle, that it should contain both good and evil, and that pity, generosity, mutual aid should be accompanied by suffering.*

*The beneficent Red Cross thus had its origin in war. But, that this institution has been able, over a hundred years, to become widespread and has acquired that efficiency which is the admiration of contemporaries, it was not sufficient that the sad lack of care given to the wounded on the battlefields of Italy aroused feelings of pity, especially in the heart of the Emperor Napoleon III, nor was it sufficient that Henry Dunant took the initiative and carried out a campaign which induced no less than twelve governments to conclude, in 1863 and 1864, the first Geneva Convention, thereby instituting on behalf of the military victims of combats an international set of rules and obligations. Even in 1949, after the odious abuses of force perpetrated during the Second World War by the totalitarian dictatorship well known to us, when an additional Convention was to cover combatants without uniforms, hostages and deportees with codified protection, it was still necessary that one and only one organisation should be created to ensure respect for the Convention, that it should possess sufficient capacity, impartiality and prestige to be able to act, in spite of the pretensions of conflicting passions and of the torments of war, and that it should find in the consciences of peoples and of their leaders the consent and help which have enabled it to endure.*

*The International Committee of the Red Cross over the past hundred years has accomplished and continues to accomplish an incomparable task. Today, I address to it, whose President is with us in person, the greetings and recognition of the French Republic.*

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<sup>1</sup> Plate.

*The purposes and the object of the French Red Cross are purely and simply humane and know no frontier. The Red Cross everywhere draws its life and its resources from national realities. In this way it resembles all other international organisations, including those which are now constructing a common edifice for their economy, their culture and their defence.*

*If, in France, the Red Cross has been able to establish itself, to act and to develop, it is because it is the French Red Cross.*

*As such, what magnificent work has it not accomplished ! Who can ignore what was done by the personnel of the Red Cross, and above all by its nurses, alongside the Medical Service, during the wars of 1870-1871, 1914-1918 and 1939-1945?*

*Has anyone the right to forget all the efforts, the pain and the suffering undergone by those men and women throughout the campaigns overseas ? Who could fail to appreciate the help which it always brought to so many sick, victims of disaster, prisoners, refugees ?*

*Mr. President, having heard the noble and masterly words with which you summed up all the success of the French Red Cross, I express to it, to its leaders and its personnel, nurses, ambulance drivers, assistants and first aid workers, the country's profound gratitude.*

*May the International Red Cross continue its work, the humanest work of all. May it tomorrow, as in the past, be able to count on France. Let the French Red Cross preserve untarnished and in the highest sense the reason for its existence, which consists of coming to the aid in time of peril of all who are suffering, and its sign which is above all private interests in the best possible way and on the highest national standard.*

Previously, Mr. A. François-Poncet, President of the French Red Cross, had painted a striking picture of " A hundred years of the French Red Cross ". He started by affirming the gratitude felt by the French Red Cross for its Honorary President, General de Gaulle. He greeted the presence of Mr. Boissier, President of the ICRC, and of Mr. Beer, Secretary-General of the League, as well as of the representatives of several National Red Cross Societies. He recalled the origins of the Red Cross, the foundation of the ICRC and its activity over a century. He then spoke of the work ceaselessly expanding of the National Society of which he is President. He mentioned the efforts which have been made in so many directions with such efficiency, and concluded as follows :

*That was a summary of the work of the French Red Cross, of its 1,200 local committees, its 90 departmental councils and its 40 members of the Administrative Council.*

*I hope this brief sketch will have shown you that the French Red Cross is by no means at the end of its course and that it is far from considering its task as being accomplished. It is in no way enclosed by habits, nor is it a prisoner of routine. It is not an administration. It is a movement, a band of people on the march, eager for change, keen to adapt itself, to renew itself unceasingly in order to face the ever-changing requirements of life. It is without doubt proud of the past which I have described in outline, and also of the present which testifies to the importance of its work. It is however turned towards the future. Its ardour is as fervent as it was at the outset. After I have finished speaking you will hear words by eminent figures explaining how this future will take shape and what will be the intellectual, moral and social aspect of the man of tomorrow, what is expected of us and, consequently, in what direction our zeal should lead us.*

*It would seem that as from now we should be bound by one lesson.*

*We are living in an age in which science extends its sway over matters to an astonishing degree. Discoveries follow each other in quick succession and the greatest inventiveness is used in new methods of destruction, more complete and on an ever more massive scale against the human race. For science is implacable, neglecting individuals, without pity and its laws are brazen. It could happen that our society could reach a very high material level with a corresponding decline in moral standards. We must guard ourselves against such a peril. This is what Bergson meant when he said that the world today, and, even more, that of tomorrow have need of additional spirituality!*

*There is nothing in fact of lasting endurance which does not come from the heart. Now, the heart's realm is that of the Red Cross.*

*In his work on Solferino, Henry Dunant addressed those he called "noble and compassionate hearts, chivalrous characters". It is from amongst these that the servants of the Red Cross are recruited. That institution, as others which are moreover similar to it, would thus appear to be a sort of salutary counter-weight to the harshness of the century.*

*Come then towards it. Give it your help and your love, until the day when men will realise that the secret of happiness lies not in fighting, in hatred, in fanaticism, but in toleration, understanding, in brotherhood and peace!"*

Then Mr. Louis Armand and Mr. Jean Bernard successively dealt with the following subjects : "The Red Cross and the world of tomorrow", and "Medicine of the future".

A meeting took place in the morning of May 25 presided over by the Minister of Health. The Directors of Civil Defence, the Army Medical Service as well as the Director-General of Public Health, and Mr. Cesbron, the writer, spoke on the subject "What





... from General De Gaulle, President of France (on his left, Mr. François-Poncet, President of the French Red Cross; on his right, Mr. Marcellin, Minister of Public Health and Population; behind him, Mr. Boissier, President of the ICRC, and Mr. Beer, Secretary-General of the League).

## TRIBUTE TO THE RED CROSS ON ITS CENTENARY

... from His Majesty the Emperor of Japan.



France expects of the French Red Cross". In conclusion, Mr. François-Poncet stressed the importance of the Red Cross Centenary and analysed the lesson to be drawn from Henry Dunant's fine example.

On the same day the inauguration took place in Paris of the "Henry Dunant cross-roads" and on Sunday a national competition of first-aid, exercises and a parade of the various Red Cross services gave immediate practical demonstration of the efficiency and vitality of the National Society, to which the ICRC was pleased to bring its congratulations and good wishes.

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## Japan

The Japanese Red Cross celebrated the Centenary of the Red Cross with an impressive ceremony which took place on May 8, 1963, in Tokyo, and at which Their Majesties the Emperor and the Empress of Japan were present. A number of leading personalities also attended, of whom mention should be made of the Imperial Princesses and the Prime Minister of Japan, together with senior officials.

The Japanese Red Cross was represented by its President, Prince Shimadzu, its Vice-Presidents, Mr. Ishizaka and Mr. Tanabe, and the heads of various departments.

H.M. The Emperor read out a message whose text was as follows: <sup>1</sup>

*It is Our pleasure to be here and meet all of you at this significant gathering to celebrate the Red Cross Centenary.*

*We are very glad that, for the past one hundred years since the establishment of the Resolutions of the Geneva International Conference, Red Cross Societies have been born in 90 countries and have made such a progress through the co-operation of people of every country in the world.*

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<sup>1</sup> Plate.

## NEWS OF NATIONAL SOCIETIES

*We are very grateful that the Japanese Red Cross Society also, making untiring efforts in co-operation with Red Cross Societies of other countries, firmly established its foundation and its programs have developed year by year.*

*We hope that all the personnel concerned will co-operate more than ever and fulfil their mission of humanitarian duty with the assistance of the people, and endeavour to contribute for the peace of the world and the welfare of humanity.*

Mr. H. C. Angst, honorary ICRC delegate in Japan, read an address from the International Committee which was translated simultaneously into Japanese. He brought the warm congratulations of the founder institution and pointed out that Henry Dunant's gesture had found a very live echo in Japan, where the National Society is carrying out magnificent work for the continuation of which the International Committee sends its best wishes in this year, in which all eyes are turned towards the humanitarian task being accomplished day after day by millions of Red Cross workers.

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### Switzerland

*The National Red Cross has been given new statutes and we are pleased to publish the following article on the meaning and implications of a revision of great importance for the future work of the Society. The co-operation of the Swiss Red Cross in protective measures for the population and the new form of membership provided for in the new statutes will be particularly remarked upon.*

The delegates of the Swiss Red Cross met recently in Berne in extraordinary assembly and after examining the statutes in use, decided to revise them. They had received the draft of the new statutes as drawn up by the Managing Committee of the Swiss Red Cross on October 25, 1962, the draft being based on a preliminary

draft presented by the Central Committee which resulted from the preparatory work of the Secretariat General and a Drafting Committee. In fact, the central organs of the National Society had been intending a general revision of the statutes for some years and, thanks to a detailed preparation, the assembly of delegates only made slight alterations to the draft, which was then adopted unanimously.

One of the principal reasons motivating a revision of the statutes of the Swiss Red Cross was the necessity to enable the latter to take an active part in the measures of protection for the civilian population scheduled in the event of war. The terms of the old statutes would have made such participation very difficult, if not impossible in certain circumstances. In fact, article 8 stipulated that "on the outset of active service, the Swiss Red Cross keeps Red Cross teams and its other resources in personnel and equipment at the disposal of the Army Medical Corps". In these conditions, it would only have been possible for the Swiss Red Cross to carry out activities on behalf of the civilian population if the Army Medical Corps itself had assigned the teams and resources in personnel and equipment which our institution keeps at its disposal, to help the civilian population or if it had released them for the same purpose. At all events, it would have been for the Army Command to decide if, and in what measure, the means of the Swiss Red Cross should be deployed in aid to the civilian population. It can be presumed that this authority, in accordance with its duty, would, in the first place, have taken into account the needs of the army.

After the adoption by the people and the cantons, in May 1959, of a constitutional article on civil defence and the decree by the Federal Chambers, in March 1962, of a federal law on civil defence (which came into operation on January 1, 1963), bases were available from which to adapt the statutes of the Swiss Red Cross to the needs of the protection of the civilian population. This adaptation was to confer on the Swiss Red Cross the right and the duty to support, in time of peace as in the event of active service, both the civil defence bodies, particularly its health service, and the civilian hospitals, by making available personnel and equipment

(including the blood transfusion service). This right and duty were to be given to the Swiss Red Cross, over and above the task incumbent upon it to support the Army Medical Corps, a task which remains as vital today as yesterday, and which the Swiss Red Cross is required to assume, in its capacity as a National Red Cross Society recognized in accordance with the Federal Decree of June 13, 1951, concerning the Swiss Red Cross.

The chapter of the new statutes devoted to peacetime work states, under the heading *Protection of the civilian population in anticipation of war* that "the Swiss Red Cross co-operates in informing the population of the dangers which it may run and the possibilities of protection, that it instructs personnel, and holds it at the disposal of the civil defence medical service and the civilian hospitals in particular, and that it deals with the preparation of equipment". In accordance with article 61 of the federal law on civil defence, the training of personnel can be done on behalf of the authorities. In this case, the personnel instructed will be under the obligation to serve in civil defence and incorporated in an organization of protection. However, the Swiss Red Cross can also, on its own initiative, instruct and reserve for its own use personnel, in anticipation particularly of assignments to civilian hospitals. With this in mind, the Swiss Red Cross began training Red Cross hospital auxiliaries some years ago.

Various alterations, made necessary by the introduction of the new tasks incumbent upon our Society in the sphere of civil defence, have been made to the chapter devoted to *the work of the Swiss Red Cross while the army is on active service*. It is pointed out that the Swiss Red Cross has to deal with the transport of the wounded and sick, nursing of the wounded and sick, and the blood transfusion service as "measures complementing those of the Army Medical Corps and in co-operation with civil defence and the civilian hospitals". As a result, the only obligation which the Swiss Red Cross still has with regard to the Army Medical Corps is to make available to the latter the military teams of the Red Cross service and the reserves of equipment set up for military use, in agreement with the Chief Medical Doctor of the army. The reserves of personnel and equipment scheduled for the army's needs can also be used to help the civilian population if the Army

Command does not promulgate restrictive instructions on this subject. Furthermore, the Swiss Red Cross is required, under the terms of an agreement concluded with the authorities concerned, to place personnel and equipment at the disposal of the civil defence bodies set up, as well as at the disposal of civilian hospitals. The new statutes, like the old, stipulate that the Swiss Red Cross is authorized to continue its peacetime work during a period of active service, in so far as the accomplishment of these activities does not prevent it from giving the necessary aid to the Army Medical Corps and from taking part in civil defence measures. Practically speaking, this eventuality will only arise in a state of neutrality.

A second factor necessitated the revision of the old statutes in relation to the intensive recruitment of members and staff which the Swiss Red Cross will be carrying out in March and April, 1963, on the occasion of the commemoration of the Red Cross Centenary. During the preparation of this action, there was a general awareness that it is of vital importance for the Swiss Red Cross and its sections, to be able to count, apart from paid members, on the support of *voluntary workers* willing to put their knowledge, their time and their strength, in the service of the Red Cross. This point of view has given rise to the desire to statutorily fix the legal bases which will allow sections to accept voluntary workers as members, it being understood that the latter will not have to provide contributions in cash, but to supply a certain work. It is obvious that these members must expressly declare their desire to adhere to the Red Cross and that they will, thus, undertake to participate in the work of a section as hospital auxiliary, voluntary assistant, blood donor, need of a class or group affiliated to the Junior Red Cross, member of a Committee or Commission or in any other manner.

As only a minority of sections desired the introduction of this new category of member, it was decided not to introduce an obligatory clause on this subject in the central statutes. Thus, according to the new statutes, the sections are not obliged, but merely authorized, "to accept as individual members any private person making himself available for long duration to a section, in order to co-operate in a Red Cross task or as a blood donor". The sections are free to specify the modalities of this form of member-

ship in their statutes, while observing in this respect the directives drawn up by the Managing Council of the Swiss Red Cross.

Furthermore, a total revision of the statutes always gives a possibility of making formal improvements or material changes of slight importance. Among these improvements and changes should be quoted the new version of article 2 defining the aim of the Swiss Red Cross, the drafting of which was kept as general as possible (" The aim of the Swiss Red Cross is to carry out, in time of peace and in time of war, humanitarian tasks in the spirit of the Red Cross "). Article 3, which describes the idea of the Red Cross, enumerates the Red Cross principles as unanimously adopted in 1961 by the Council of Delegates of the International Red Cross (humanity, impartiality, neutrality, independence, voluntary service, unity and universality). Moreover, the peacetime tasks have, in part, been newly formulated ; in particular, account has been taken of the development of nursing, first-aid, Junior Red Cross, the participation of the Swiss Red Cross in assistance to old people, the chronically ill and invalids.

In conclusion, it should be pointed out that the new statutes contain a special chapter devoted to the *Blood Transfusion Service Central Laboratory*, which has developed its activities considerably since 1949. The Central Laboratory is defined as an institute which " carries out within the framework of the Swiss Red Cross Blood Transfusion Service, tasks arising from organization, manufacture, examination and scientific research ".

The new statutes, which have been submitted to the Federal Council for approval, constitute a wide and solid basis for the future work and development of the Swiss Red Cross. Provided these activities and development are not only effective, but bear the imprint of the true Red Cross spirit, definite benefits will result.

**HANS HAUG**

Secretary General of  
the Swiss Red Cross

## CHRONICLE

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### HUMANITARIAN AID TO VICTIMS OF INTERNAL CONFLICTS

*In our issue of last February, we published the report of the Commission of Experts consulted by the ICRC on the question of humanitarian aid to the victims of internal conflicts.*

*A few days after this Commission ended, the 7th Inter-American Red Cross Conference opened in San Juan, Puerto Rico, in November 1962, and a report of this Conference has already appeared in the Review<sup>1</sup>. The question of the rôle of the International Committee and of National Societies in the event of internal conflicts was on the agenda.*

*The ICRC's report on this point was received with a great deal of interest, particularly as the events in Cuba were then giving great reality to the study of these problems. The part of this report which deals with the critical analysis of the results obtained by the ICRC over the past years, and that which concerns the latter's proposals with a view to subsequent action (proposals inspired by the conclusions of the recent Commission of Experts) seem to us to merit our readers' special attention. In fact, they give a greater definition to the respective rôles of the National Red Cross Societies and the International Red Cross in aiding the victims of internal conflicts.*

*There now follow large extracts of this report which was presented at Puerto Rico by one of the representatives of the ICRC, Mr. Henri Coursier :*

*" Since the signature of Article 3 common to the four Geneva Conventions of 1949, it can be said that in most disturbances which have arisen, the International Committee has been able to act on*

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<sup>1</sup> See *International Review*, January 1963.



behalf of the victims of the conflict, either because the Power responsible for public order has accepted without objection the application of Article 3 (as was the case in Guatemala in 1954<sup>1</sup> and then in Algeria from 1955 onwards) or because having made reservations on the application of this article, it nevertheless allowed the action of the ICRC on humanitarian grounds (as in Kenya).

It has even happened that in situations which could manifestly not have come under Article 3 because the element of armed conflict was lacking, Governments have authorized the International Committee to visit political detainees (as was the case in west and east Germany from 1958, as well as Yugoslavia from 1959).

Generally speaking, the humanitarian action of the International Committee has consisted hitherto of visiting places of detention, speaking freely with detainees, distributing relief, and in case of necessity, making on the spot suggestions to the authorities concerned for improvements in mental and physical treatment of the detainees.

In certain cases, this action has taken place with the more or less extensive co-operation of the local Red Cross organizations, but in other cases, the International Committee has been solely responsible.

The factor common to all these interventions is their strictly humanitarian character. It was never a question of taking a position in an internal conflict, or of recognizing the insurgents as having any legal status whatsoever. In all these cases, the Committee was seeking to help the individual and to ensure respect for the human being.

The Commission of experts in 1955 did not intend to divide the powers between the National Societies and the International Committee of the Red Cross.

Very different situations can, in fact, arise in the relationships between the national societies and the government with which they may be called upon to intervene. With regard to the action of the International Red Cross, the International Committee of the Red Cross must decide in each case what practical forms this action should take, taking into consideration all circumstances in order to ensure maximum

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<sup>1</sup> See *Revue internationale*, October 1954.

rapidity and efficacy. Each separate case may call for a different solution. There are no hard and fast rules of procedure. The essential fact is to make known to the national society, to the authorities, and to the victims of events that the International Red Cross is prepared to come to their assistance.

In fact the question is a delicate one, since it involves, as we have said above, the fundamental principle of the independence of the Red Cross.

This independence, which traditionally characterizes the action of the International Committee of the Red Cross, must also characterize that of the National Societies if the principles of the Red Cross are to be respected. However, National Societies' relations with Governments can be influenced in such a way as to limit or even momentarily paralyse their independence. In such cases, the International Committee of the Red Cross must enter into direct contact with the Government, but one thing is certain, it must endeavour to obtain the co-operation of the National Society as much as possible and in the interest of the development of its action. Its first step, whether it is acting on a request from outside or of its own accord must be to ask for information from the National Red Cross. It is to be hoped that, generally speaking, the National Red Cross will be able to dispense to the victims of internal conflicts a humanitarian aid in conformity with the principles of the Red Cross. The intervention of the International Committee will help it in its humanitarian task by supporting it, if necessary vis-à-vis its Government.

\* \* \*

The Council of Delegates of the International Red Cross (Prague, September 1961), on the proposal of the Yugoslav Red Cross aiming to improve "legal protection for victims of internal armed conflicts and other similar events", asked the ICRC to report to the next International Conference of the Red Cross.

The Commissions of Experts in 1953 and 1955 had already marked important stages in the study of this problem. Already in 1959, the ICRC had considered convening a third Commission of Experts to examine anew the whole question. This meeting should

have been held at the end of the Board of Governors of the League (Athens, 1959) to enable Red Cross experts from Latin America to take part. Circumstances prevented this consultation from taking place. However, as the Yugoslav Red Cross pointed out, there remain many points to be clarified and guarantees to be defined to consolidate the results obtained during the last few years.

The ICRC has been unceasingly concerned with the question. Furthermore, its experiences, mentioned above, have contributed to strengthen the doctrine of the Red Cross. However, in view of the report and the proposals which it will be submitting to the next International Conference of the Red Cross, it convened a third Commission of Experts in Geneva from October 25 to October 30, 1962 whose conclusions will shortly be put before the National Red Cross Societies.

With regard to the discussions of the XVIIth Inter-American Conference (Puerto Rico, November 1962), the ICRC will certainly take advantage of them to establish the report which it intends to submit to the next International Conference of the Red Cross.

Without wishing to anticipate the contents of this report, it seems that one can already envisage the respective rôles of the National Red Cross and the International Committee of the Red Cross within the following bounds.

Internal conflicts are so many cases in point and the solutions can be different.

If it concerns a rebellion in colonial territory, it can happen that the rebel party has not yet instituted a Red Cross organization. If it has done so, the International Committee could not recognize such an organization officially, although it can maintain useful contact with it on a strictly humanitarian level.

When it is a question of internal conflicts, such as those which have occurred in recent years in Latin America, the fundamental principles of the Red Cross—the principles of humanity, impartiality and independence, particularly—should be the guarantors of the permanence of a humanitarian work to be carried on quite outside any considerations of a political nature. Unfortunately, it must be admitted that in most internal conflicts, the senior staff of the National Red Cross are replaced. This can be explained, even allowing for the failures of the former personnel, by the links

which exist between the Red Cross and the Government, particularly during periods of crisis. The rôle of a quasi-public service, assumed by the National Red Cross on countless occasions, then implies a co-operation of confidence between it and the authority. One can therefore understand that, for personal reasons, a revolutionary Government mistrusts a priori leaders who have had dealings of confidence with its predecessors.

This means to say that a National Society which wishes to act usefully in a case of internal conflict and maintain its unity must prepare itself for this in time of peace. In this respect, here are a few suggestions : the organization of a National Red Cross Society should be sufficiently decentralized, especially when the State concerned is not a federation, for the local or regional sections to enjoy a certain autonomy and not to find themselves paralysed if contacts with the Central headquarters are interrupted.

The leaders of a National Society should, as much as possible, be persons who do not take an active part in the political struggle. The ideal would be that, in the event of a change in the political regime, there would be no reason for making changes in the composition of the Central Committee and of the Departments of the Society.

A National Society should not undertake any action and should do nothing which from near or far might appear to favour a party in power or in opposition.

The problem merits close examination, because the National Societies are, by vocation, institutions which can and should, on the humanitarian level, play an important rôle in case of armed conflicts. Independently of the aid which the International Committee of the Red Cross can give in such circumstances, the National Societies must be able to serve as a link between the opposite parties and act on behalf of all victims.

With regard to the International Committee, when it considers it advisable to intervene, it will advise its representative or representatives who must seek authorization to exercise certain practical activities on behalf of persons persecuted or interned by reason of events.

The conditions of the ICRC's intervention, as well as the minimum of material and moral guarantees to be accorded to detainees

in order to conform to the principles of the Universal Declaration of the Rights of Man, were put forward by the Commission of Experts of 1953; the discussions of this Commission on these essential points should certainly be referred to.

It should be added that without any doubt, the ICRC is entitled to offer the services of the Central Tracing Agency (formerly the Central Prisoners of War Agency) and that it can deal with the forwarding and distribution of relief supplies, according to the means which are put at its disposal.

Mr. Léopold Boissier, the President of the ICRC, recently wrote: "The existence of the Geneva Conventions and especially of their article 3, fortunately enabled the International Committee to intervene deliberately and to make use of its rights of initiative. Each of the actions undertaken in Algeria, Laos, Nepal, the Congo, in Indonesia and elsewhere, had very different characteristics, but they were all carried out in the same spirit which was that of the Red Cross.

On the eve of the Centenary in 1963, it can be said that the Geneva institution has continued to increase in vigour, authority and effectiveness; for the past hundred years. *Vires acquirit eundo*. By advancing it gains new strength."

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## A GLANCE THROUGH THE REVIEWS

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**The Red Cross and the Nurse**, by Yvonne Hentsch, *International Nursing Review*, 1963, No. 2.

... In all Red Cross activities, as in others too numerous to mention here, the professional nurse plays a vital rôle.

At the local, regional and national levels of the national Societies around the world she is welcome in many capacities: as adviser to determine the Society's programme and to direct nursing activities, also to register for service in case of emergency, whether it be prevention of epidemics or in national disasters. She is also needed for service in other single aspects of the Society's programme, such as nursing education, as a teacher of home nursing and first aid, nursing auxiliaries, and in health education programmes and with the Junior Red Cross; she may work directly in immunization and blood transfusion programmes, in public health activities, Red Cross hospital service, as midwife, and in other medico-social services. In all of these activities she can volunteer to give as much time as she has available.

In line with today's technical progress, national Societies are engaging in nursing research projects, such as the Canadian Red Cross in nursing education, and the Swiss Red Cross in nursing personnel needs. Societies in newly developing countries are starting to train the public in all types of basic health education, and requests for technical assistance in this field are filled by specialists provided through League recruitment of personnel available from other Societies and from the League Secretariat itself. By working in close contact with other international organisations such as the ICN and WHO, and consulting with the International Committee of the Red Cross in establishing standards for nursing personnel in time of conflict, the League keeps in touch with the development and progress of the nursing profession.

Nursing and the Red Cross are in step with each other: the Red Cross principles of humanity, impartiality, neutrality, independence, voluntary service, unity and universality apply to both.

In entering a second century of service, the continuing development of mutual ideals is a source of inspiration for even greater effort in filling the ever-increasing needs of today's world.

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**World Conference of Educators.** *Newsletter of Junior Red Cross, Geneva, 1963.*

The World Conference of Educators, which will be held in Lausanne from 19 to 23 August 1963, will reappraise the Junior Red Cross programme and its place in the school in the light of modern educational trends ; adapt the programme of the Junior Red Cross to fit the conditions and needs of young people today and tomorrow ; and encourage a closer co-operation on the part of the teaching body in the work and aims of the Red Cross throughout the world.

In addition to the National Red Cross Societies, such international organizations as UNESCO, WHO, UNICEF, the International Bureau of Education, the World Confederation of Organizations of the Teaching Profession, and the World Federation of Teachers' Unions will be invited to attend the Conference.

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**Cours de formation d'orienteurs professionnels au Royaume-Uni**  
*Bulletin du Bureau international d'Education, Genève, n° 146.*

An official research project extending over two years is to be carried out by the Professor of Education at Nottingham University who, from 1962, is devoting all his time to the problems of the education of deaf people, particularly in its relation to scholastic backwardness. It is apparent that a link exists between linguistic backwardness in deaf children and their lack of maturity on the social and ethical levels.

Research is to be made in this direction and it is hoped to be able to measure all the factors in scholastic backwardness or incomplete general development due to deafness. The research plan also includes a study of "hand language" and "finger writing", which will help and guide parents and teachers of deaf children.

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**Informations sociales, February 1963, Paris 1963, No 2.**

At the end of the Second World War, the International Social Service consisted of : the Headquarters and only five of its initial branches : France, Italy, Switzerland, Czecho-Slovakia and the United States of America. The German and the Greek branch were quickly reconstituted. The Czechoslovak branch ceased to function in 1948.

Since then, three new branches have been created in Europe : Belgium, Great Britain, The Netherlands. An efficient delegation is operating in Austria. Canada has created an affiliated Bureau under the care of the Canadian Welfare Council, while in South America, an immigration country for numerous European refugees, branches have been established in Brazil and in Venezuela as well as a delegation in Argentine. Australia also became part of the international network, often appealing to the I.S.S. on behalf of families still abroad separated from immigrants they receive. The Japanese branch is at the moment in full activity. At the request of the American branch, primarily occupied with finding adoptive families for thousands of abandoned Eurasian and Chinese children, offices have been opened in Geneva, Okinawa and Hong Kong.

At this moment eighteen branches and delegations closely cooperate under the direction of the headquarters. Through contacts and connections with other social organisations, the I.S.S. is now able to work in 102 countries.

New tasks succeed old ones without interruption, demanding constant readaptation of working methods. Be it adoption problems from country to country, or the problems of refugees from Tunisia, Morocco and quite recently those who fled from Algeria, the I.S.S. is prepared to meet all demands. To these urgent problems of reception, of regrouping, of finding work for political refugees are added the problems, which for some years have become a permanent feature of Europe, namely of the workers' migration towards the most industrialized countries. The Italians, the Spanish, the Portuguese settle in France, Belgium, Germany, the Netherlands and in Great Britain, drawn by better salaries. In spite of the difference of language, way of living, climate, they arrive in ever greater numbers.

Thus, forty years after its foundation, the ISS is more active than ever. Against all financial difficulties which have never ceased to arise, it has been able to maintain in all countries the same spirit of solidarity and understanding of individual problems produced by the voluntary or compulsory transplantation in a world perpetually on the move.



EXTRACT FROM THE STATUTES OF  
THE INTERNATIONAL COMMITTEE OF THE RED CROSS

(AGREED AND AMENDED ON SEPTEMBER 25, 1952)

ART. 1. — The International Committee of the Red Cross (ICRC), founded in Geneva in 1863 and formally recognized in the Geneva Conventions and by International Conferences of the Red Cross, shall be an independent organization having its own Statutes.

It shall be a constituent part of the International Red Cross.<sup>1</sup>

ART. 2. — As an association governed by Articles 60 and following of the Swiss Civil Code, the ICRC shall have legal personality.

ART. 3. — The headquarters of the ICRC shall be in Geneva.

Its emblem shall be a red cross on a white ground. Its motto shall be "Inter arma caritas".

ART. 4. — The special rôle of the ICRC shall be :

- (a) to maintain the fundamental and permanent principles of the Red Cross, namely: impartiality, action independent of any racial, political, religious or economic considerations, the universality of the Red Cross and the equality of the National Red Cross Societies ;
- (b) to recognize any newly established or reconstituted National Red Cross Society which fulfils the conditions for recognition in force, and to notify other National Societies of such recognition ;

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<sup>1</sup> The International Red Cross comprises the National Red Cross Societies, the International Committee of the Red Cross and the League of Red Cross Societies. The term "National Red Cross Societies" includes the Red Crescent Societies and the Red Lion and Sun Society.

- (c) to undertake the tasks incumbent on it under the Geneva Conventions, to work for the faithful application of these Conventions and to take cognizance of any complaints regarding alleged breaches of the humanitarian Conventions ;
- (d) to take action in its capacity as a neutral institution, especially in case of war, civil war or internal strife ; to endeavour to ensure at all times that the military and civilian victims of such conflicts and of their direct results receive protection and assistance, and to serve, in humanitarian matters, as an intermediary between the parties ;
- (e) to contribute, in view of such conflicts, to the preparation and development of medical personnel and medical equipment, in co-operation with the Red Cross organizations, the medical services of the armed forces, and other competent authorities ;
- (f) to work for the continual improvement of humanitarian international law and for the better understanding and diffusion of the Geneva Conventions and to prepare for their possible extension ;
- (g) to accept the mandates entrusted to it by the International Conferences of the Red Cross.

The ICRC may also take any humanitarian initiative which comes within its rôle as a specifically neutral and independent institution and consider any questions requiring examination by such an institution

ART. 6 (first paragraph). — The ICRC shall co-opt its members from among Swiss citizens. The number of members may not exceed twenty-five.



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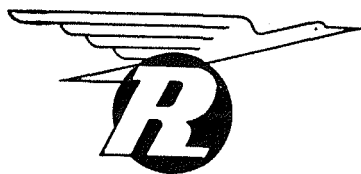
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- AFGHANISTAN — Afghan Red Crescent, *Kabul*.
- ALBANIA — Albanian Red Cross, 35, Rruga Barrikadavet, *Tirana*.
- ARGENTINE — Argentine Red Cross, H. Yrigoyen 2068, *Buenos Aires*.
- AUSTRALIA — Australian Red Cross, 122-128 Flinders Street, *Melbourne, C. 1*.
- AUSTRIA — Austrian Red Cross, 3 Gusshausstrasse, *Vienna IV*.
- BELGIUM — Belgian Red Cross, 98, Chaussée de Vleurgat, *Brussels*.
- BOLIVIA — Bolivian Red Cross, Avenida Simon-Bolivar, 1515 (Casilla 741), *La Paz*.
- BRAZIL — Brazilian Red Cross, Praça da Cruz Vermelha 10-12, *Rio de Janeiro*.
- BULGARIA — Bulgarian Red Cross, 1, Boul. S.S. Biruzov, *Sofia*.
- BURMA — Burma Red Cross, 42, Strand Road, Red Cross Building, *Rangoon*.
- CAMBODIA — Cambodian Red Cross, 8 Phlaur Ang Nonn, P.O.B. 94, *Pnom-Penh*.
- CANADA — Canadian Red Cross, 95, Wellesley Street East, *Toronto 5*.
- CEYLON — Ceylon Red Cross, 106, Dharma-pala Mawatte, *Colombo VII*.
- CHILE — Chilean Red Cross, Avenida Santa Maria 0150, Casilla 246 V., *Santiago de Chile*.
- CHINA — Red Cross Society of China, 22, Kanmien Hutung, *Peking, E*.
- COLOMBIA — Colombian Red Cross, Carrera 7a, 34-65 Apartado nacional 11-10, *Bogota*.
- COSTA RICA — Costa Rican Red Cross, Calle 5a Sur, Apartado 1025, *San José*.
- CUBA — Cuban Red Cross, Ignacio Agramonte 461, *Havana*.
- CZECHOSLOVAKIA — Czechoslovak Red Cross, Thunovska 18, *Prague III*.
- DENMARK — Danish Red Cross, Platanvej 22, *Copenhagen V*.
- DOMINICAN REPUBLIC — Dominican Red Cross, Calle Galvan 24, Apartado 1293 *San Domingo*.
- ECUADOR — Ecuadorian Red Cross, Avenida Colombia y Elizalde 118, *Quito*.
- ETHIOPIA — Ethiopian Red Cross, P.O. Box 195, *Addis Ababa*.
- FINLAND — Finnish Red Cross, Tehtaankatu I A, *Helsinki*.
- FRANCE — French Red Cross, 17, rue Quentin-Bauchart, *Paris (8<sup>e</sup>)*.
- GERMANY (Dem. Republic) — German Red Cross in the German Democratic Republic, Kaitzerstrasse 2, *Dresden A. 1*.
- GERMANY (Federal Republic) — German Red Cross in the Federal Republic of Germany, Friedrich-Ebert-Allee 71, *Bonn*.
- GHANA — Ghana Red Cross, P.O. Box 835 *Accra*.
- GREAT BRITAIN — British Red Cross, 14 Grosvenor Crescent, *London, S.W.1*.
- GREECE — Hellenic Red Cross, rue Lycavittou 1, *Athens 135*.
- GUATEMALA — Guatemalan Red Cross, 3.<sup>a</sup> Calle entre 8.<sup>a</sup> y 9.<sup>a</sup> Avenidas, *Guatemala*.
- HAITI — Haiti Red Cross, rue Férou, *Port-au-Prince*.
- HONDURAS — Honduran Red Cross, Calle Henry Dunant, *Tegucigalpa*.
- HUNGARY — Hungarian Red Cross, Arany Janos utca 31, *Budapest V*.
- ICELAND — Icelandic Red Cross, Thorvaldsensstraeti 6, *Reykjavik*.
- INDIA — Indian Red Cross, 1 Red Cross Road, *New Delhi 1*.
- INDONESIA — Indonesian Red Cross, Tanah Abang Barat 66, P.O. Box 2009, *Djakarta*.
- IRAN — Iranian Red Lion and Sun Society, Avenue Ark, *Teheran*.
- IRAQ — Iraqi Red Crescent, *Baghdad*.
- IRELAND — Irish Red Cross, 25 Westland Row, *Dublin*.
- ITALY — Italian Red Cross, 12, via Toscana, *Rome*.
- JAPAN — Japanese Red Cross, 5 Shiba Park, Minato-Ku, *Tokyo*.
- JORDAN — Jordan Red Crescent, P.O. Box 1337, *Amman*.
- KOREA (Democratic Republic) — Red Cross Society of the Democratic People's Republic of Korea, *Pyongyang*.
- KOREA (Republic) — The Republic of Korea National Red Cross, 32-3 Ka Nam San-Dong, *Seoul*.
- LAOS — Laotian Red Cross, *Vientiane*.
- LEBANON — Lebanese Red Cross, rue Général Spears, *Beirut*.

## ADDRESSES OF CENTRAL COMMITTEES

- LIBERIA** — Liberian National Red Cross, Camp Johnson Road, *Monrovia*.
- LIBYA** — Libyan Red Crescent, Berka Omar Mukhtar Street, P.O. Box 541, *Benghazi*.
- LIECHTENSTEIN** — Liechtenstein Red Cross, *Vaduz*.
- LUXEMBURG** — Luxemburg Red Cross, Parc de la Ville, *Luxemburg*.
- MEXICO** — Mexican Red Cross, Sinaloa 20, 4º piso, *Mexico* 7, D.F.
- MONACO** — Red Cross of Monaco, 27, Boul. de Suisse, *Monte-Carlo*.
- MONGOLIA** — Red Cross Society of the Mongolian People's Republic, Central Post Office, Post Box 537, *Ulan-Bator*.
- MOROCCO** — Moroccan Red Crescent, rue Calmette, *Rabat*.
- NETHERLANDS** — Netherlands Red Cross, 27 Prinsessegracht, *The Hague*.
- NEW ZEALAND** — New Zealand Red Cross, 61 Dixon Street, P.O.B. 6073, *Wellington C.2*.
- NICARAGUA** — Nicaraguan Red Cross, 12 Avenida Nordeste, 305, *Managua*, D.N.C.A.
- NIGERIA** — The Nigerian Red Cross Society, 2, Makoko Road, P.O. Box 764, *Lagos*.
- NORWAY** — Norwegian Red Cross, Parkveien 33b, *Oslo*.
- PAKISTAN** — Pakistan Red Cross, Frere Street, *Karachi* 4.
- PANAMA** — Panamanian Red Cross, Apartado 668, *Panama*.
- PARAGUAY** — Paraguayan Red Cross, calle André Barbero y Artigas, *Asunción*.
- PERU** — Peruvian Red Cross, Tarapaca 881, *Lima*.
- PHILIPPINES** — Philippine National Red Cross, 600 Isaac Peral Street, P.O.B. 280, *Manila*.
- POLAND** — Polish Red Cross, Mokotowska 14, *Warsaw*.
- PORTUGAL** — Portuguese Red Cross, General Secretaryship, Jardim 9 de Abril, 1 a 5, *Lisbon* 3.
- RUMANIA** — Red Cross of the Rumanian People's Republic, Strada Biserica Amzei 29, C.P. 729, *Bucarest*.
- SALVADOR** — Salvador Red Cross, 3a Avenida Norte y 3a Calle Poniente 21, *San Salvador*.
- SAN MARINO** — San Marino Red Cross, *San Marino*.
- SIERRA LEONE** — Sierra Leone Red Cross Society, 6 Liverpool Street, P.O.B. 427, *Freetown*.
- SOUTH AFRICA (Republic)** — South African Red Cross, 14 Hollard Street, P.O.B. 8726, *Johannesburg*.
- SPAIN** — Spanish Red Cross, Eduardo Dato 16, *Madrid*, 10.
- SUDAN** — Sudanese Red Crescent, P.O. Box 235, *Khartum*.
- SWEDEN** — Swedish Red Cross, Artillerigatan 6, *Stockholm* 14.
- SWITZERLAND** — Swiss Red Cross, Taubenstrasse 8, *Berne*.
- SYRIA** — Syrian Red Crescent, 13, rue Abi-Ala-Almaari, *Damascus*.
- THAILAND** — Thai Red Cross Society, King Chulalongkorn Memorial Hospital, *Bangkok*.
- TOGO** — Togolese Red Cross Society, Avenue des Alliés 19, P.O. Box 655, *Lome*.
- TUNISIA** — Tunisian Red Crescent, 1, Avenue de Carthage, *Tunis*.
- TURKEY** — Turkish Red Crescent, Yenisehir, *Ankara*.
- UNITED ARAB REPUBLIC** — Red Crescent Society of the United Arab Republic, 34, rue Ramses, *Cairo*.
- UPPER VOLTA** — Upper Volta Red Cross, P.O.B. 340, *Ouagadougou*.
- URUGUAY** — Uruguayan Red Cross, Avenida 8 de Octubre, 2990, *Montevideo*.
- U.S.A.** — American Red Cross, National Headquarters, 17th and D Streets, N.W., *Washington* 6, D.C.
- U.S.S.R.** — Alliance of Red Cross and Red Crescent Societies, Kouznetsky Most 18/7, *Moscow* k. 31.
- VENEZUELA** — Venezuelan Red Cross, Avenida Andrés Bello No 4, *Caracas*.
- VIET NAM (Democratic Republic)** — Red Cross of the Democratic Republic of Viet Nam, 68, rue Bà-Triez, *Hanoi*.
- VIET NAM (Republic)** — Red Cross of the Republic of Viet Nam, 201, duong Hồng-Tháp-Tu, No. 201, *Saigon*.
- YUGOSLAVIA** — Yugoslav Red Cross, Simina ulica broj 19, *Belgrade*.